California Rural Health Policy Council

Rural Healthcare Workforce Group Meeting Summary January 3, 2003

Attendees:

Jack Burrows, ACHD
Kiki Nocella, USC
Susan Ferrier, NSRHN
Carl Havener, CHEAC
Bud Lee, RHPC/OSHPD
Pablo Rosales, OSHPD
Kathleen Maestas, RHPC
Jessica Trubowitch, RHPC
Elizabeth Saviano, DHS
Sharon Avery, CHA/RHC
Linda Zorn, RHORC/CA Community Colleges

- 1. The meeting began with a review the charge adopted by the Group at the last meeting. (Copy of Charge attached)
- 2. Bud gave a recap and informed the Group, as a follow-up to last meeting's discussion regarding membership of the Group, he contacted Judith Shaplin and Kevin Grumbach. They are both are very interested in participating in this process. They will both be invited to the next meeting.
- 3. The group reviewed the matrix provided by strategy. (Copy of Strategy Matrix Attached)

Results:

The Group combined the strategies included in the attached matrix into four main categories and also converted some strategies into a "tool box."

CATEGORIES

- **1. Community Solutions** (Kiki and Pablo to follow up with each other) Descriptions:
 - 20/20 program "Earn to Learn" individual facility programs.
 - Loan Forgiveness physicians agree to practice in medically underserved communities in exchange for repayment of student loans.

- Board level participation Educate boards of rural health institutions and involve them in recruitment process.
- Incentives such as employment for physician's spouse, infrastructure, emergency fund for students, and marketing "desirability" of rural communities.
- **2. Physician Modules** (Kiki & John Blossom will work on this and will use the group as a sounding board)
 - Rural Underserved/Population Opportunity Program (RU/POP) (Comment: Residency programs difficult to set up. Hospitals do not know what they are getting into. No federal money. The community or the school must pay.)
 - Rural rotation: (Kiki and John Blossom) Dr. Blossom will be asked to make presentation at March 26 Meeting.

3. Nurse Education

- Linda Zorn will invite Maggie White (subsequently accepted) to discuss online program.
 (Comment: Need standardized curriculum to streamline process for nurse training. Need more faculties. Need tighter standards of nursing teachers.)
- Monitor what is going on and make sure the "rural" component is not forgotten.
- **4. Licensure/Credentialing** (needs more research of scopes of practice, regulatory boards of all occupations/disciplines). OSHPD to follow up.
 - Midlevels Group requested more information on subject of midlevels such as what is current, where are the gaps?
 - Oral Health possible manpower pilot project

TOOLBOX

- Distance Learning (Sharon, Linda, Susan, Speranza) will draft a white paper on distance learning)
- Career Development
- Demonstration Projects via OSHPD statutory authority

Discussion:

The discussion of the group centered on the strategy matrix provided. The following is a brief summary of key points discussed:

Distance Learning:

Funding is still the largest barrier

- Recognition of important difference between "pre" and "post" licensure education.
- Barriers/challenges:
- Clinical instruction for pre-licensure
- Credentialing Standards
- Definition of "distance learning" (not the same as extended campuses)

20/20 Programs:

Look to partner with community organizations and health foundations

Nurse Preceptorship (need to be part of wider strategy)

- Need to expand programs
- Brings nurses to rural areas

Midlevel Practitioners

- Issue of scope of practice.
- "Turf" issues
- "substandard care" public perception?
- Supervision
- No requirement difference between rural and urban.
- Can be used in all categories: clinical, oral, mental, pharmacy, lab.
- Possible use of Manpower Pilot program to support one mid level group.

Diversity:

Increasing diversity should be used as a guiding principle.

Nursing Workforce Initiative:

- Concept: encourage regional collaboration.
- Articulation agreements
- \$60 million over three years

Oral Health Initiative

- Will continue monitoring
- It was suggested that the support of hygienist pilot project might be a short-term success especially in current economy where there is not money for health but rather there are cuts.

<u>Next Meeting:</u> March 26th, 10:00 a.m. – 3:00 p.m. at California Endowment *Teleconferencing will be available.